



India's Healthcare Priorities- The Road Ahead Round Table Discussion

NATHEALTH, 22nd March 2019

Fortis Memorial Research Institute Auditorium, Gurgaon

India's Healthcare Priorities- The Road Ahead

NATHEALTH vision and strategy clearly emphasizes building collaborative partnerships with all stakeholders of the healthcare system, especially the central and state governments.

Various government bodies also seek engagement with the private sector to jointly explore ways to increase access and efficiency of healthcare delivery.

Under the aegis of the AGM, NATHEALTH will orchestrate a high powered leadership dialogue between the government entities and the private sector on three critical topics which, in turn, will help scale Ayushman Bharat initiative for better outcomes

- Tier 2/3 Expansion- Scaling Ayushman Bharat
- Increasing DNB Throughput, Funding the Skill Gap
- Financing Primary Care & NCD Screening

NATHEALTH Role to drive Arogya Bharat

1

Galvanize NATHEALTH and Eco System knowledge and expertise to frame meaningful dialogues

2

Mobilize partners, from India and outside, to develop meaningful proof of concepts and pathways for scale

3

Shape healthcare policies and regulations to align with Government's vision of Universal Health Coverage and better outcomes

4

Advocate the cause of Healthcare sector participants via sustained communication and education campaigns

5

Catalyze innovation in Healthcare by harnessing our experience and expertise to provide innovative solutions at scale

Schedule

“Scaling Ayushman Bharat for Better Outcomes”

Context India plans to increase the contribution of the healthcare sector from 1% to 2.5% of the GDP. Major Investments Required in Tier 2/Tier 3 Cities. Who will invest and under what conditions? What will be Roadmap for setting up 150,000 Health and Wellness Centers? What role can Private Sector Play in terms of partnerships and Expertise?

Government

- Dr. Vinod Paul (NITI Aayog) (Chief Guest)
- Dr. Dinesh Arora (NHA)

Industry

- Dr. Preetha Reddy (Apollo Group)
- Dr. Sudarshan Ballal (Manipal)
- (Hony) Brig. Dr. Arvind Lal (Dr. Lal Path Labs)

Special Address

- Dr. Prathap C Reddy (Apollo Group)

Moderator Dr. Harsh Mahajan (Mahajan Imaging)

Duration 10:30 am- 12:45 pm

Sub Topics

- A. Tier 2/3 expansion; Scaling Ayushman Bharat
- B. Increasing DNB throughput, funding the skill gap
- C. Financing primary care and NCD screening

Schedule

- 10:30 am- 11:00 am Setting the context of the discussion (15 Minutes- Government/10 Mins- Industry) (Industry: Mr. Daljit Singh | Government Dr. Vinod Paul- Inaugural Address) followed by Special Address by Dr. Prathap C Reddy
- 11:00 am- 11:10 am: Setting the context of the sub topics in facts and figures (Mr. Karan Singh- Bain & Company)
- 11:10 am- 12:10 pm: Three sub-topics (Round Table- 60 minutes with Panelists) (Anchored by Dr. Harsh Mahajan)
- 12:10 pm- 12:30 pm : Q&A (Moderated between Audience and Panelists) (Dr. Harsh Mahajan)
- 12:30 pm- 12:45 pm : Wrap-up and next steps (Dr. Sudarshan Ballal)

Context

A Tier 2/3 expansion; Scaling Ayushman Bharat

There is a strong need for tertiary and quaternary care centres that will reach all corners of the country, especially Tier 2 and Tier 3 cities where there is a current gap. GoI through Ayushman Bharat aims to bridging the affordability gap that exists by providing financing support to the lower income group populations that live in Tier 2+ cities.

This needs to be accompanied by expansion of infrastructure to capture the demand that is being unlocked. Leading private players find Tier2/3 cities challenging due to lower realization, talent scarcity and scalability. While the private sector has opened capacity in Tier2/3 cities and now has considerable operations experience, consistent and easy to replicate business and operating models remain elusive.

The private sector is willing to deepen its commitment to serve in these areas with the right support and policy design that address the current operational barriers.

B Increasing DNB throughput, funding the skill gap

Addressing the adverse Physician to patient ratios is clearly a top-of-the-mind issue for majority of decision makers in the healthcare system. One of the simpler solutions taking advantage of the growing tertiary care expertise in the country is to increase the number of DNB seats to increase supply of PG doctors.

At the same time, an associated larger program of creating and adopting innovative medical education technologies that can support bringing the required increase via training of allied health professionals.

In essence, any new regulation should be quality dependent than notional view of quality (doctor student ratio etc.) as in other professions (legal, CA etc.).

Skill gap funding needs a public private partnership frame as doctor, nursing and technician churn is a an operational issue for all providers.

C Financing primary care and NCD screening

In India, the rapid rise of NCDs makes it not merely a health issue but a development issue with expensive long term impact. Both the government and the private sector need to work together to bring a viable solution to manage lifestyle diseases in particular.

Beyond NCDs, a strong and vibrant primary healthcare system can help build the backbone of our healthcare delivery system and pivot our health.

Both public and private sectors have tried different primary care rural and urban models but they are yet to freeze on a template(s) that can be emulated across the country.

Under Ayushman Bharat, a more integrated preventive care effort needs to be designed and tested at scale. Private sector providers along with other technology, data and system participants would like to partner with Government in demonstration projects in urban, semi-urban and rural settings.



Thank you

NATHEALTH, AGM, 22nd March 2019
Fortis Auditorium, Gurgaon